



# Robert Castellano

Serial No.: 09/691,756

Filed: October 18, 2000

**For: System and Method for Polling Devices  
In A Network System**

Group Art Unit: 2665

Examiner: Michael J. Molinari

**Docket No.: 061607-1550**

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JUN 29 2004

## Technology Center 2600

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

Sir:

Applicant submits the following amendments and remarks to the non-final Office Action mailed from the United States Patent and Trademark Office on April 28, 2004 (Paper No. 5).

### **AUTHORIZATION TO DEBIT ACCOUNT**

It is not believed that additional fees are required, beyond those which may otherwise be provided for in the documents accompanying this paper. However, in the event that additional fees are necessary to allow consideration of this paper, such extensions are hereby petitioned under 37 C.F.R. §1.136(a), and any fees required therefor (including fees for net additions of claims) are hereby authorized to be charged to Paradyne Corporation's Deposit Account No. 16-0255.

JUN 2 5 2004

2665

## AMENDMENT TRANSMITTAL LETTER (LARGE)

Applicant(s): Robert Castellano

Docket No.

061607-1550

Serial No.  
09/691,756Filing Date  
October 18, 2000Examiner  
Michael J. MolinariConfirmation No.  
3872Group Art Unit  
2665

Invention: System and Method for Polling Devices in a Network System

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Commissioner for Patents  
Mail Stop Amendment  
P.O. Box 1450  
Alexandria VA 22313-1450

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Transmitted herewith is First Response (with Amendments) in the above-identified application.

The fee has been calculated and is transmitted as shown below

## CLAIMS AS AMENDED

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	28 -	44 =	0	X \$18.00	\$
INDEP. CLAIMS	3 -	5 =	0	X \$86.00	\$
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				\$145.00	\$
EXTENSION FEE	1 <sup>ST</sup> MONTH <input type="checkbox"/> 55.00	2 <sup>ND</sup> MONTH <input type="checkbox"/> 210.00	3 <sup>RD</sup> MONTH <input type="checkbox"/> 475.00	4 <sup>TH</sup> MONTH <input type="checkbox"/> 740.00	\$
Other Fees:					\$
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00

- ☒ No additional fee is required.  
☐ Please charge Deposit Account No. \_\_\_\_\_ in the amount of \_\_\_\_\_.  
☐ A check in the amount of \_\_\_\_\_ to cover the filing fee is enclosed. A duplicate copy of this page is enclosed.  
☐ A Credit Card Payment Form PTO-2038 is attached in the amount of \$ \_\_\_\_\_.  
☒ The Director is hereby authorized to charge any deficiencies of the above fees or credit any overpayment to Deposit Account No. 16-0255.

  
 Karen G. Hazzah, Reg. No. 48,472

June 22, 2004  
 Date